PTO/SB/17 (10-08)
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Crider trid Fa	respond to a collection of information unless it displays a valid OMB control number  Complete if Known								
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number 10/822,556-Conf. #2616					
FEE TRANSMITTAL						April 12, 2004			
						sashi Enomoto			
For FY 2009			Examiner Name G		G. Mowla				
Applicant claims small entity status. See 37 CFR 1.27			7 41, 014,		795				
TOTAL AMOUNT OF PAYMENT (\$) 810.00			Attorney Docket No. S		S1459.70088US00				
METHOD OF PAYMENT (check all that apply)									
Check X Credit Card Money Order None Other (please identify):									
Deposit Account Deposit Account Number 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C.									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING	G, SEARCH, AND E	XAMINATION FEE	S						
	FI	LING FEES Small Entity	SE.	ARCH FEES  Small Entity	EXAMINA	ATION FEES			
Application Ty	<u>roe</u> <u>Fee (</u> \$		Fee (\$		Fee (\$)	Small Entity Fee (\$)	<u>Fees P</u>	aid (\$)	
Utility	330	165	540	270	220	110			
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85			
Reissue	330	165	540	270	650	325			
Provisional	220	110	0	0	0	0			
2. EXCESS CLAIM FEES Small Entity									
Fee Description Fee (\$)									
Each claim over 20 (including Reissues) 52						26			
Each independent claim over 3 (including Reissues)							220	110	
Multiple dependent claims 390 <u>Total Claims</u> Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Cla						195			
<u>Total Claims</u>	Extra Claim or HP =			ee Paid (\$)	<u>Multiple L</u> Fee (\$)		Fee Paid (\$)		
	oer of total claims paid fo				1.66	141	e cala (	Ĺ	
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)									
- or HP = X =									
HP ≈ highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1 801 Request for continued examination (RCE) (see 37 810.00									
SUBMITTED BY	<u>g</u>	01							
Signature	Kelner	4)-Mitte	h	Registration No. (Attorney/Agent)	35,986	Telephone	617.646.8000		
Name (Print/Type)	Randy J. Pritzke	. /				Date	December 1, 2008		

Certificate of Electronic Filing Under 37 CFR 1,8								
I hereby certify that this paper (along	with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing							
system in accordance with § 1.6(a								
Dated: December 1, 2008	Signature: Alla Kair Weller (Paula K. Fairweather)							
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